Case 6:21-bk-12487-SC Doc 1 Filed 05/03/21 Entered 05/03/21 23:21:16 Des

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Michael	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Wallner	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Michael A. Wallner Mike Wallner Michael Anthony Wallner	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9145	

De	wiichaei waiiner		Case Humber (ir known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live	1653 Kendall Drive	If Debtor 2 lives at a different address:			
		San Bernardino, CA 92407 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		San Bernardino County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
5.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	-					

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De	btor 1	Michael Wallner					Case numb	er (if known)	
Pa	rt 2:	Tell the Court About	Your Ba	nkruptcy (Case				
7.	Bank	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	cnoo	sing to file under	Ch	apter 7					
			☐ Ch	apter 11					
			☐ Ch	apter 12					
			☐ Ch	apter 13					
8.	How	you will pay the fee	a	about how	you may pay. Typ ur attorney is sub	en I file my petition. Ple bically, if you are paying mitting your payment on	the fee yourself, you m	nay pay with cash, cashi	ier's check, or money
						tallments. If you choose	this option, sign and	attach the <i>Application fo</i>	r Individuals to Pay
				150		's (Official Form 103A). aived (You may request	this option only if you	are filing for Chapter 7. I	Bv law, a judge mav.
			_ b	out is not re	quired to, waive	your fee, and may do so nd you are unable to pay	only if your income is	less than 150% of the o	fficial poverty line that
						Chapter 7 Filing Fee Wa			
		97.				200			
9.		Have you filed for bankruptcy within the							
		last 8 years?	☐ Yes.						
				District		When	<u> </u>	Case number	
				District		When		Case number	s
				District		When		Case number	
10.		ny bankruptcy pending or being	■ No						
	filed b not fil you, o	y a spouse who is ing this case with r by a business er, or by an	☐ Yes.						
				Debtor			4.00	Relationship to you	
				District		When		Case number, if known	
				Debtor				Relationship to you	
				District	V.020	When		Case number, if known	
1.	Do voi	ı rent your	□ No.	Go to	line 12.				
	reside	nce?	Yes.			ined an eviction judgme	nt against you?		
			- Yes.				,		
					No. Go to line 1		F. J. H		
					Yes. Fill out <i>Init</i> bankruptcy peti	tial Statement About an tion.	⊏viction Judgment Aga	ainst You (Form 101A) a	ina tile it with this

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De	ebtor 1 Michael Wallner				Case number (if known)		
Pa	rt 3: Report About Any B	usinesse	s You Own as a	Sole Proprie	etor		
White			704 01111 40 0	2 0010 1 100110			
12	 Are you a sole proprietor of any full- or part-time business? 	No.	Go to Part	4.			
		☐ Yes.	Name and	location of bus	siness		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			usiness, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach	proprietorship, use a					
	it to this petition.		Check the	appropriate bo	ox to describe your business:		
	,				ness (as defined in 11 U.S.C. § 101(27A))		
			☐ Sing	gle Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
					efined in 11 U.S.C. § 101(53A))		
					er (as defined in 11 U.S.C. § 101(6))		
				ne of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are cash-flov § 1116(1	under Subchap choosing to prod w statement, and)(B).	ter V so that it beed under Su d federal incon	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.		
	For a definition of small	No.	I am not filir	ng under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	l am filing u Code.	nder Chapter 1	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.		I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.			
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.		
Part	t 4: Report if You Own or	Have Any	Hazardous Pr	operty or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the ha	zard?			
	public health or safety? Or do you own any property that needs immediate attention?		If immediate at needed, why is				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the pr	roperty?	Number, Street, City, State & Zip Code		

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Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

15. Tell the court whether you have received a briefing about credit counseling.

Michael Wallner

Debtor 1

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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I am not required to receive a briefing about credit
counseling because of:

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Case number (if known) Michael Wallner Part 6: **Answer These Questions for Reporting Purposes** What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses No. are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do □ 1,000-5,000 **25,001-50,000** 1-49 you estimate that you □ 5001-10,000 **50,001-100,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million **\$0 - \$50,000** estimate your assets to □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 be worth? ☐ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$500,000,001 - \$1 billion □ \$0 - \$50.000 □ \$1,000,001 - \$10 million estimate your liabilities □ \$1,000,000,001 - \$10 billion ☐ \$10,000,001 - \$50 million \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion ☐ \$100,000,001 - \$500 million □ \$500,001 - \$1 million

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

every que	estion.							
Part 7:	Sign Below							
For you		I have examined this petition, and I declare under penalty of	perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I ma United States Code. I understand the relief available under e	ly proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, ach chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pa document, I have obtained and read the notice required by 1						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		and 3571.	or obtaining money or property by fraud in connection with a conment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,					
		Michael Wallner Signature of Debtor 1	Signature of Debtor 2					
		Executed on O4 20 - 20 21 MM / DD / YYYY	Executed on MM / DD / YYYY					

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Debtor 1 Michael Wallner	Main Document	Page 8 of 54	e number (if known)
mondo, vidino,		_	
For your attorney, if you are represented by one f you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petitic under Chapter 7, 11, 12, or 13 of title 11, United St for which the person is eligible. I also certify that I and, in a case in which § 70% (b)(4)(D) applies, cert schedules filed with the petition is incorrect. Signature of Attorney for Debtor Frank R. Sariol, Esq., 140406 Printed name Frank R. Sariol, PC, dba Sariol Legal Firm name 1820 East First Street Suite 200 Santa Ana, CA 92705 Number, Street, City, State & ZIP Code Contact phone 714-953-4700 140406 CA Bar number & State	ates Code, and have e have delivered to the d	explained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
None

2.	(If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform
	Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the
	debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the
	debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the
	complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge
	and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list
	any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
No	ne .

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
None

Approximately and the second second			
declare, und	er penalty of perjury, that the forego		
Executed at	San Bernardino	, California.	michael Walerer
Date:	4-20-21		Michael Wallner Signature of Debtor 1
			Signature of Debtor 2

	Case	e 6:21-bk-1248 <i>i</i>	Main Doc		Entered 05/03/2 e 10 of 54	1 23:21	.:16 L	Desc
Fi	l in this informa	ation to identify your	case:					
De	ebtor 1	Michael Wallner	Middle Name	Last Name				
	btor 2			Last Name				
	ouse if, filing)	First Name cruptcy Court for the:	Middle Name CENTRAL DISTRICT					
			and improved to the seek reason to the seek of the	OF OTEN OTTOK				
1000000	se number					_	Check if th	
							amended	Tiling
Of	ficial Forr	n 106Sum						
-			nd Liabilities a	nd Certain Sta	itistical Informati	on	12/1	5
Be info	as complete and	d accurate as possibl t all of your schedule	e. If two married peoples first; then complete	le are filing together, the information on th	both are equally respons is form. If you are filing a	ible for su mended so	pplying co	orrect after you file
you	r original forms	, you must fill out a n	ew Summary and che	ck the box at the top	of this page.			
Pa	t 1: Summar	ize Your Assets						
	i						our asset alue of wh	s at you own
1.		: Property (Official For 55, Total real estate, fro					S	0.00
	1b. Copy line 6	2, Total personal prop	erty, from Schedule A/B			\$	S	26,144.00
	1c. Copy line 6	3, Total of all property	on Schedule A/B			9	S	26,144.00
Par	t 2: Summari	ze Your Liabilities						-
							our liabili mount you	
2.	Schedule D: Co 2a. Copy the to	reditors Who Have Clai tal you listed in Columi	ims Secured by Propert n A, Amount of claim, at	y (Official Form 106D) t the bottom of the last	page of Part 1 of <i>Schedule</i>	D \$		27,512.00
3.	Schedule E/F: 3a. Copy the to	Creditors Who Have Unotal claims from Part 1	nsecured Claims (Official (priority unsecured clain	al Form 106E/F) ms) from line 6e of <i>Sch</i>	edule E/F			0.00
	3b. Copy the to	otal claims from Part 2	(nonpriority unsecured of	claims) from line 6j of S	Schedule E/F	\$		24,656.12
					Your total liabil	ities \$		52,168.12
Part	3: Summariz	ze Your Income and E	xpenses					
4.		ur Income (Official Forn		ə I		\$		3,339.50
5.		ur Expenses (Official Fi thly expenses from line	orm 106J) 22c of Schedule J			\$		3,579.00
Part	4: Answer Ti	hese Questions for A	dministrative and Stat	istical Records				

Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Michael Wallner Page 11 of 54

Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 4,175.00
		\$ 4,175.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Main Document	raye 12 01 34		
Fill in this inf	ormation to identify your case	and this filing:	Miller Report		
Debtor 1	Michael Wallner				
	First Name	Middle Name L	ast Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name L	ast Name	****	
United States	Bankruptcy Court for the: CEN	ITRAL DISTRICT OF CALIFOR	INIA		
Case number					☐ Check if this is a amended filing
					g
Official F	orm 106A/B				
		3.7			4044
	Ile A/B: Propert		and fite in more than one	natagon, list the accet in	12/15
ink it fits best.	Be as complete and accurate as pore space is needed, attach a sepa	oossible. If two married people ar	e filing together, both are e	equally responsible for su	pplying correct
Part 1: Describ	oe Each Residence, Building, Land	, or Other Real Estate You Own o	r Have an Interest In		
Do you own o	r have any legal or equitable intere	est in any residence, building, lan	d, or similar property?		
No. Go to P	Part 2				
_	e is the property?				
_ 100. 1	o to the property.				
Part 2: Describ	e Your Vehicles				
alt 2. Describ	e rour venicles				
	ase, or have legal or equitable				ehicles you own that
omeone else a	rives. If you lease a vehicle, also	report it on Schedule G: Exect	itory Contracts and Unex	pirea Leases.	
Cars, vans, t	trucks, tractors, sport utility ve	ehicles, motorcycles			
□ No					
Yes					
3.1 Make:	Ford	Who has an interest in the pro	operty? Check one	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
Model:	F-150 Truck	Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
Year: Approxima	2018 ate mileage: 26,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
Other info		At least one of the debtors a	nd another	Inches in the second of the se	,
	on: 1653 Kendall Drive,	П		\$22,450.00	\$22,450.00
San Ber	nardino CA 92407	Check if this is community (see instructions)	property	Ψ22,430.00	Ψ22,430.00
	ircraft, motor homes, ATVs an ats, trailers, motors, personal wa				
					
■ No					
☐ Yes					
					
Add the doll	ar value of the portion you ow	n for all of your entries from	Part 2, including any en	tries for	\$22.4E0.00
pages you h	ave attached for Part 2. Write t	that number here		=>	\$22,450.00
rt 2. Dagarih -	Vous Personal and Hausah - 12 15-	ame			
S100000000000	Your Personal and Household Ite have any legal or equitable int		items?	C	urrent value of the
,		,,	and the second s		ortion you own?

Do not deduct secured claims or exemptions.

Case 6:21-bk-12487-SC Doc 1 Filed 05/03/21 Entered 05/03/21 23:21:16 Page 13 of 54 Main Document Debtor 1 Case number (if known) Michael Wallner 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... **Bedroom Furniture** \$500.00 Location: 1653 Kendall Drive, San Bernardino CA 92407 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Phone, Television \$500.00 Location: 1653 Kendall Drive, San Bernardino CA 92407 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No. ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Normal clothing \$300.00 Location: 1653 Kendall Drive, San Bernardino CA 92407 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$200.00 Watches 13. Non-farm animals Examples: Dogs, cats, birds, horses No. ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list

Official Form 106A/B

Schedule A/B: Property

☐ Yes. Give specific information.....

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Debtor 1	Michael Wallner	Case number (if known)	
	the dollar value of all of your entries from Pa art 3. Write that number here	rt 3, including any entries for pages you have attached	\$1,500.00
Part 4: De	scribe Your Financial Assets		
在是在社员全国的	vn or have any legal or equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		ne, in a safe deposit box, and on hand when you file your petition	on
Yes			,
		Cash NOTE: Debtor has no bank accounts.	<u></u> \$100.00
	ts of money les: Checking, savings, or other financial accouinstitutions. If you have multiple accounts w	nts; certificates of deposit; shares in credit unions, brokerage h vith the same institution, list each.	iouses, and other similar
☐ Yes		Institution name:	
Examp	mutual funds, or publicly traded stocks les: Bond funds, investment accounts with broke	erage firms, money market accounts	
■ No □ Yes	Institution or issuer na	ime:	
joint ve		ated and unincorporated businesses, including an interest	in an LLC, partnership, and
Negotia Non-ne ■ No	ment and corporate bonds and other negotia ble instruments include personal checks, cashio gotiable instruments are those you cannot trans	able and non-negotiable instruments ers' checks, promissory notes, and money orders.	
☐ Yes. C	Sive specific information about them Issuer name:		
	ent or pension accounts es: Interests in IRA, ERISA, Keogh, 401(k), 403	(b), thrift savings accounts, or other pension or profit-sharing p	olans
☐ Yes. L	ist each account separately. Type of account:	Institution name:	
Your sh	deposits and prepayments are of all unused deposits you have made so thes: Agreements with landlords, prepaid rent, pul	at you may continue service or use from a company olic utilities (electric, gas, water), telecommunications compani	es, or others
- 115		Institution name or individual:	
	Rent Security Deposit	Ron Hoch	\$1,300.00
3 Annuitie	s (A contract for a periodic payment of money t	o you either for life or for a number of years)	
■ No □ Yes		o you, out of the a harmon of yours)	3.
□ 165			

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

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	Michael Wallner		Case number (if known)	
26 U.S	S.C. §§ 530(b)(1), 529A(b), and 5	29(b)(1).		и
■ No				
☐ Yes	Institution name	and description. Separately file the records of any intere	ests.11 U.S.C. § 521(c):	
25. Trusts ■ No	s, equitable or future interests	in property (other than anything listed in line 1), and	l rights or powers exercisa	ble for your benefit
☐ Yes.	. Give specific information abou	them		
Exam		de secrets, and other intellectual property basites, proceeds from royalties and licensing agreemen	nts	
■ No □ Yes.	. Give specific information about	them		
27. Licens	ses, franchises, and other gen		ses, professional licenses	
■ No □ Yes	Give specific information about	them		
	*			Cummont value of the
Money or	property owed to you?		ł	Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax ref	funds owed to you			
□ No	to the second of			
Yes.	Give specific information about	hem, including whether you already filed the returns and	d the tax years	
			_	
		Refund 2020 - Debtor had to pay a fine for		
		Refund 2020 - Debtor had to pay a fine for this exact amount because he had no health insurance last year.	Federal Tax	\$750.00
		this exact amount because he had no	Federal Tax	\$750.00
		this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for this exact amount because he had no		
		this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for	Federal Tax State Tax	\$750.00
■ No		this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for this exact amount because he had no	State Tax	\$44.00
Examp No Yes. (oles: Past due or lump sum alimo Give specific information	this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for this exact amount because he had no health insurance last year. ny, spousal support, child support, maintenance, divorce urance payments, disability benefits, sick pay, vacation	State Tax se settlement, property settler	\$44.00
Examp No Yes. (oles: Past due or lump sum alimo Give specific information amounts someone owes you les: Unpaid wages, disability ins	this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for this exact amount because he had no health insurance last year. ny, spousal support, child support, maintenance, divorce urance payments, disability benefits, sick pay, vacation	State Tax se settlement, property settler	\$44.00
Examp No Yes. 0 30. Other a Example No Yes. 0 31. Interest Example	oles: Past due or lump sum alimo Give specific information mounts someone owes you les: Unpaid wages, disability ins benefits; unpaid loans you r Give specific information ts in insurance policies	this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for this exact amount because he had no health insurance last year. ny, spousal support, child support, maintenance, divorce urance payments, disability benefits, sick pay, vacation	State Tax re settlement, property settler pay, workers' compensation	\$44.00
Examp No Yes. 0 30. Other a Example No Yes. 0 31. Interest Example No	Give specific information Immounts someone owes you les: Unpaid wages, disability ins benefits; unpaid loans you r Give specific information Its in insurance policies les: Health, disability, or life insu	this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for this exact amount because he had no health insurance last year. ny, spousal support, child support, maintenance, divorce payments, disability benefits, sick pay, vacation hade to someone else	State Tax re settlement, property settler pay, workers' compensation	\$44.00
Examp No Yes. 0 30. Other a Example No Yes. 0 31. Interest Example No	oles: Past due or lump sum alimo Give specific information mounts someone owes you les: Unpaid wages, disability ins benefits; unpaid loans you r Give specific information ts in insurance policies	this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for this exact amount because he had no health insurance last year. ny, spousal support, child support, maintenance, divorce payments, disability benefits, sick pay, vacation hade to someone else rance; health savings account (HSA); credit, homeowne each policy and list its value.	State Tax re settlement, property settler pay, workers' compensation er's, or renter's insurance	\$44.00 ment
Examp No Yes. 0 30. Other a Example No Yes. 0 31. Interest Example No Yes. No See	Give specific information Immounts someone owes you les: Unpaid wages, disability ins benefits; unpaid loans you r Give specific information Is in insurance policies les: Health, disability, or life insurance tompany of Company	this exact amount because he had no health insurance last year. Refund 2020 - Debtor had to pay a fine for this exact amount because he had no health insurance last year. ny, spousal support, child support, maintenance, divorce transce payments, disability benefits, sick pay, vacation hade to someone else rance; health savings account (HSA); credit, homeowne each policy and list its value.	State Tax e settlement, property settler pay, workers' compensation er's, or renter's insurance	\$44.00 ment n, Social Security Surrender or refund value:

Official Form 106A/B

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Debt	or 1	Michael Wallner		Case number (if known)	
		against third parties, whether or not you have filed a es: Accidents, employment disputes, insurance claims, o		nand for payment	
	Yes. I	Describe each claim			
	No	entingent and unliquidated claims of every nature, in	cluding counterclaims	of the debtor and rights t	o set off claims
Ц	res. L	rescribe each claim			
40	No	ncial assets you did not already list Bive specific information			
	res. C	sive specific information			
		e dollar value of all of your entries from Part 4, included 4. Write that number here			\$2,194.00
Part 5	Desc	ribe Any Business-Related Property You Own or Have an In	terest In. List any real est	tate in Part 1.	
37 Do	VOII 014	n or have any legal or equitable interest in any business-rel	ated property?		
	lo. Go to		ateu property:		
		to line 38.			
	00. 00				
Part 6:		ribe Any Farm- and Commercial Fishing-Related Property Yo own or have an interest in farmland, list it in Part 1.	ou Own or Have an Intere	est In.	
46. Do	you o	wn or have any legal or equitable interest in any farn	n- or commercial fishi	ng-related property?	
3	No. Go	to Part 7.			
	Yes. (So to line 47.			
Part 7:	對論時	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
Ex	cample	ave other property of any kind you did not already lis s: Season tickets, country club membership	st?		
<u> </u>					
ПΙ	res. Gi	ve specific information			
54. A	dd the	dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part 8:	Li	at the Totals of Each Part of this Form			
55. P	art 1· T	otal real estate, line 2			\$0.00
		otal vehicles, line 5	\$22,450.00		Ψ0.00
		otal personal and household items, line 15	\$1,500.00		
		otal financial assets, line 36	\$2,194.00		
		otal business-related property, line 45	\$0.00		
		otal farm- and fishing-related property, line 52	\$0.00		
		otal other property not listed, line 54	+ \$0.00		
62. To	otal pe	rsonal property. Add lines 56 through 61	\$26,144.00	Copy personal property to	otal \$26,144.00
63. To	otal of	all property on Schedule A/B. Add line 55 + line 62			\$26,144.00

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Fill in this inform	ation to identify your	case:			
Debtor 1	Michael Wallner				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		CENTRAL DISTRICT O	F CALIFORNIA		
Case number (if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim as I	Exempt							
1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)		y.					
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	2018 Ford F-150 Truck 26,000 miles Location: 1653 Kendall Drive, San	\$22,450.00	趋	\$5,850.00	C.C.P. § 703.140(b)(2)				
	Bernardino CA 92407 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	2018 Ford F-150 Truck 26,000 miles	\$22,450.00	53	\$16,600.00	C.C.P. § 703.140(b)(5)				
Bern	Location: 1653 Kendall Drive, San Bernardino CA 92407 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	Bedroom Furniture	\$500.00	No.	\$500.00	C.C.P. § 703.140(b)(3)				
	Location: 1653 Kendall Drive, San Bernardino CA 92407 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Phone, Television Location: 1653 Kendall Drive, San	\$500.00	7	\$500.00	C.C.P. § 703.140(b)(3)				
	Bernardino CA 92407 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Normal clothing	\$300.00	*	\$300.00	C.C.P. § 703.140(b)(3)				
	Location: 1653 Kendall Drive, San Bernardino CA 92407 Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit					

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Debtor 1 Michael Wallner			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property portion you own		Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Watches Line from Schedule A/B: 12.1	\$200.00	150	\$200.00	C.C.P. § 703.140(b)(4)
Ellie II olii ochedate 74B. TZ.T			100% of fair market value, up to any applicable statutory limit	
Cash NOTE: Debtor has no bank accounts.	\$100.00	塘	\$100.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
Rent Security Deposit: Ron Hoch	\$1,300.00	惊	\$1,300.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
Federal Tax: Refund 2020 - Debtor had to pay a fine for this exact	\$750.00		\$750.00	C.C.P. § 703.140(b)(5)
amount because he had no health insurance last year. Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
State Tax: Refund 2020 - Debtor had to pay a fine for this exact amount	\$44.00	è	\$44.00	C.C.P. § 703.140(b)(5)
because he had no health insurance last year. Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption o (Subject to adjustment on 4/01/22 and every 3	f more than \$170,350 years after that for ca)? ses file	ed on or after the date of adjustment	1.)
■ No	-		•	•
☐ Yes. Did you acquire the property covered	d by the exemption wit	:hin 1,	215 days before you filed this case?	
□ No				
☐ Yes				

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		Main Document Page	e 19 of 54		
Fill in this informati	ion to identify yo	ur case:			
Debtor 1	Michael Wallne	r			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankru	uptcy Court for the	: CENTRAL DISTRICT OF CALIFORNIA			
C					
Case number				3 S	if this is an
				amend	ded filing
Official Form 1	06D				
		Who Have Claims Secured	hy Proporty	÷	40/45
schedule Di	Creditors	Who have Claims Secured	a by Property		12/15
number (if known). I. Do any creditors have					
☐ No. Check this	box and submit the	nis form to the court with your other schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in all o	of the information I	pelow.			
Part 1: List All Se	cured Claims				
for each claim. If more the	han one creditor has	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Capital One A	uto Finance	Describe the property that secures the claim:	\$27,512.00	\$22,450.00	\$5,062.00
Creditor's Name	-	Automobile			
Attn: Bankrup	otcy				
P.O. Box 3028	AND THE RESERVE OF THE PARTY OF	As of the date you file, the claim is: Check all that apply.			
Salt Lake City	, UT 84130	☐ Contingent			
Number, Street, City,	State & Zip Code	☐ Unliquidated			
COMMITTED THE STATE OF THE STATE OF		☐ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the det	otors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim re community debt	elates to a	Other (including a right to offset)			
	Opened 04/18 Last				
	Active				
Date debt was incurred	3/05/21	Last 4 digits of account number 1001			
Add the dollar value of	f your entries in Co	lumn A on this page. Write that number here:	\$27,512.	.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$27,512.00

Write that number here:

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			M	iain Docume	ent Paç	ge 20 of 54		
Fill in	this inform	ation to identify your c	ase:					
Debto	or 1	Michael Wallner						
37.35.5.6.6		First Name	Middle	Name	Last Name			
Debto		-						
(Spouse	e if, filing)	First Name	Middle	Name	Last Name			
United	d States Bank	cruptcy Court for the:	CENTRAL	DISTRICT OF C	ALIFORNIA			
Case	number							
(if known								Check if this is an
								amended filing
O#:~	ial Farm	1065/5						
	ial Form				d Claima			40/45
		F: Creditors Wh				Part 2 for creditors with NONP	DIODITY -	12/15
Schedu Schedu eft. Atta	le G: Executo le D: Creditors ach the Contir nd case numb	ry Contracts and Unexpir s Who Have Claims Secui nuation Page to this page er (if known).	ed Leases (C red by Prope . If you have	Official Form 106G) erty. If more space no information to). Do not include is needed, copy	contracts on Schedule A/B: Pro- any creditors with partially se the Part you need, fill it out, no do not file that Part. On the top	cured clair imber the	ns that are listed in entries in the boxes on the
Part 1:	List All	of Your PRIORITY Uns	ecured Cla	ims			-	
_	.5	have priority unsecured	claims agair	ıst you?				
	No. Go to Part	2.						
	Yes.							
Part 2:	liet ΔII c	of Your NONPRIORITY	Unsecured	d Claims				
		have nonpriority unsecu						
_					· · · · · · · · · · · · · · · · · · ·	- dul-		
		nothing to report in this part	i. Submit this	form to the court wi	ith your other sch	edules.		
18	Yes.							
uns	ecured claim, I n one creditor h	ist the creditor separately for	or each claim	. For each claim list	ed, identify what	o holds each claim. If a creditor type of claim it is. Do not list clain three nonpriority unsecured claim	ns already i	ncluded in Part 1. If more
								Total claim
4.1	AMEX			Last 4 digits of a	ccount number	7153		\$1,388.00
	Nonpriority Cr	editor's Name		Street Control of Street Contr				
	P.O. Box 9	ndence/Bankruptcy		When was the de	ht incurred?	Opened 01/18 Last Ac 7/13/19	tive	
	El Paso, T			Wileli was the de	bt incurred :	1113/13		
		t City State Zip Code		As of the date you	u file, the claim i	is: Check all that apply		
	Who incurred	the debt? Check one.						
	Debtor 1 o	nly		☐ Contingent				
	Debtor 2 o	nly		☐ Unliquidated				
	Debtor 1 a	nd Debtor 2 only		☐ Disputed		*		
	☐ At least on	e of the debtors and anothe	er	Type of NONPRIO	ORITY unsecured	d claim:		
		his claim is for a commu	nity	☐ Student loans				
	debt Is the claim s	ubject to offset?		Obligations aris		ration agreement or divorce that	you did not	
	No No					g plans, and other similar debts		
	☐ Yes			Other. Specify	NOTE OF THE PERSON OF THE PERS	Proproposal Antonio Proposal Proposal State Propriet State Proprie		
	□ 168			Otner. Specify	Jiedit Caru			 i

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Debto	Michael Wallner		Case number (if known)	
4.2	Cavalry Portfolio Services Nonpriority Creditor's Name	Last 4 digits of account number	6211	\$1,858.00
	Attn: Bankruptcy 500 Summit Lake Drive, Suite 400 Valhalla, NY 10595	When was the debt incurred?	Opened 11/19 Last Active 04/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans	d Claim.	
	☐ Check if this claim is for a community debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	a plane, and other similar debts	
	■ No		- Particular and the second and the	
	Yes	Other. Specify Collection	Agency for Citibank	
4.3	Citibank/Exxon Mobile Nonpriority Creditor's Name	Last 4 digits of account number	4111	\$1,135.00
	Attn: Bankruptcy P.O. Box 790034	When was the debt incurred?	Opened 03/18 Last Active 11/19	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
1.4	Citibank/Goodyear Nonpriority Creditor's Name	Last 4 digits of account number	9334	\$674.00
	Attn: Bankruptcy P.O. Box 790034	When was the debt incurred?	Opened 09/18 Last Active 02/21	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	claim:	
	At least one of the debtors and another	Student loans	olum.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	□ Yes	■ Other, Specify Charge Acc	90.	

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Debt	or 1 Michael Wallner		Case number (if known)	
4.5	Citibank/Shell Oil Nonpriority Creditor's Name	Last 4 digits of account number	1021	\$905.00
	Citicorp Credit Services Centralized BK Dept. P.O. Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 03/18 Last Active 10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharing Other. Specify Credit Card	- ·	
4.6	Credit First National Association Nonpriority Creditor's Name	Last 4 digits of account number	7167	\$1,018.00
	Attn: Bankruptcy P.O. Box 81315 Cleveland, OH 44181 Number Street City State Zip Code Who incurred the debt? Check one.	Opened 11/16 Last Active 02/21 s: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	·	
4.7	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	7994	\$3,241.00
	Attn: Bankruptcy P.O. Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 02/18 Last Active 05/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separ report as priority claims	claim: ation agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharing ☐ Other. Specify Credit Card	plans, and other similar debts	

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Deb	tor 1 Michael Wallner		Case number (if known)				
4.8	DSRM Nat Bank/Valero Nonpriority Creditor's Name	Last 4 digits of account number	0000	\$544.00			
	Attn: Bankruptcy P.O. Box 696000 San Antonio, TX 78260	When was the debt incurred?	Opened 03/18 Last Active 03/20				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify					
4.9	Genesis FS Card Services Nonpriority Creditor's Name	Last 4 digits of account number	9123	\$175.00			
	Attn: Bankruptcy P.O. Box 4477 Beaverton, OR 97076	When was the debt incurred?	Opened 10/20 Last Active 02/21				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card					
4.1 0	Jefferson Capital Systems, LLC	Last 4 digits of account number	3003	\$597.00			
	Nonpriority Creditor's Name Attn: Bankruptcy 16 McLeland Road	When was the debt incurred?	Opened 07/19 Last Active 12/18				
	Saint Cloud, MN 56303 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	:: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only ☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separareport as priority claims	ation agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	plans, and other similar debts				
	□Yes	■ Other. Specify	ompany Account Fingerhut				

Debtor	1 Michael Wallner		Case number (if known)	
4.1	Kohls/Capital One	Last 4 digits of account number	2252	\$213.00
	Nonpriority Creditor's Name Attn: Credit Administrator P.O. Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 04/17 Last Active 2/13/21	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Matthew W. Quall, Esq. for Cavalry	Last 4 digits of account number	5348	\$1,858.12
	Nonpriority Creditor's Name Quall Cardot LLP 205 East River Park Circle, # 110 Fresno, CA 93720	When was the debt incurred?	February 10, 2021 - Summons Filed	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims		
	No No	Debts to pension or profit-sharing		
	□ Yes	■ Other. Specify 2105348 - S		
	Midland Fund Nonpriority Creditor's Name	Last 4 digits of account number	1192	\$833.00
;	Attn: Bankruptcy 350 Camino De La Reine Ste 100	When was the debt incurred?	Opened 11/19 Last Active 04/19	
1	San Diego, CA 92108 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
2	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
_	☐ Check if this claim is for a community	☐ Student loans		
c	lebt s the claim subject to offset?	Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	☐Yes	■ Other. Specify	ompany Account Synchrony	

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Debi	or 1 Michael Wallner		Case number (if known)	
4.1 4	Midland Fund	Last 4 digits of account number	9289	\$812.00
	Nonpriority Creditor's Name Attn: Bankruptcy 350 Camino De La Reine Ste 100 San Diego, CA 92108	When was the debt incurred?	Opened 12/19 Last Active 06/19	,
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Factoring C Other. Specify Capital Bar	Company Account Comenity	
l.1 ;	Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number	1215	\$1,114.00
	Attn: Bankruptcy 120 Corporate Blvd.	When was the debt incurred?	Opened 10/20 Last Active 01/19	
	Norfolk, VA 23502 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	• •		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Bank USA.	ompany Account Capital One N.A.	
1	Portfolio Recovery	Last 4 digits of account number	9857	\$795.00
	Nonpriority Creditor's Name Attn.: Bankruptcy 120 Corporate Blvd.	When was the debt incurred?	Opened 08/20 Last Active 12/18	
	Norfolk, VA 23502 Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
	Who incurred the debt? Check one.		2-0000000 0 m 2 m 2 m 11 N	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	■ Other. Specify Factoring C Bank USA N	ompany Account Capital One .A.	

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Deb	or 1 Michael Wallner		Case number (if known)				
4.1 7	Resurgent Capital Services	Last 4 digits of account numb	oer0521	\$1,805.00			
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 10497	When was the debt incurred?	Opened 07/19 Last Active 12/18				
	Greenville, SC 29603 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	im is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	ured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a s report as priority claims	eparation agreement or divorce that you did not				
	■ No	Debts to pension or profit-sha	aring plans, and other similar debts				
	☐ Yes	■ Other. Specify Bank N.A	g Company Account Credit One				
.1	Resurgent Capital Services Nonpriority Creditor's Name	Last 4 digits of account numb	er 1058	\$680.00			
	Attn: Bankruptcy P.O. Box 10497	When was the debt incurred?	Opened 11/19 Last Active 04/19				
	Greenville, SC 29603 Number Street City State Zip Code	As of the date you file, the clai	m is: Check all that apply				
	Who incurred the debt? Check one.	,					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sereport as priority claims	eparation agreement or divorce that you did not				
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts				
	Yes	■ Other. Specify Missouri	Company Account Bank Of				
1	Ron and Toni Hoch	Last 4 digits of account numbe	r	\$0.00			
	Nonpriority Creditor's Name P.O. Box 9436		2012 Month-to-month rent the house where Debtor and his				
	San Bernardino, CA 92427	When was the debt incurred?	Mother live full time.				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecui	red claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sereport as priority claims	paration agreement or divorce that you did not				
	No	☐ Debts to pension or profit-shar	ing plans, and other similar debts				
	□Yes	The second secon	ouse where Debtor and his e full time				

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Debte	Michael Wallner		Case number (if known)	
4.2	Syncb/Care Credit	Last 4 digits of account number	4439	\$1,249.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 11/05 Last Active 1/14/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plane and other similar debts	
	■ No			
	☐ Yes	Other. Specify Charge Acc	count	
4.2	Target	Last 4 digits of account number	1883	\$3,140.00
	Nonpriority Creditor's Name c/o Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 11/14 Last Active 09/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent	•	
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims		
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
1.2	The Bureaus Inc	Last 4 digits of account number	2190	\$622.00
	Nonpriority Creditor's Name Attn: Bankruptcy 650 Dundee Road, Ste 370	When was the debt incurred?	Opened 08/19 Last Active 02/19	
	Northbrook, IL 60062 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Collection A National As	ttorney for Capital One sociation	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1	Michae	I Wallner

Case number (if known)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$ _	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
		,		-	
	6e.	Total Priority. Add lines 6a through 6d.	6e.	s	0.00
	50.	Total Trotty () to a mice ou amough ou.	00.	Ψ-	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total				-	
claims	_				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	•	24,656.12
		here.		Ψ -	21,000112
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	24,656.12
				· -	

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Fill in this inform	ation to identify your	case:		
Debtor 1	Michael Wallner	5		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		CENTRAL DISTRICT O	F CALIFORNIA	
Case number				Suppose Sensor of Code & S. and
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Ron and Toni Hoch P.O. Box 9436 San Bernardino, CA 92427 Month-to-month lease of the house where Debtor and his Mother reside full time.

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		Main Docur	nent Page 30	0 01 54	
Fill in t	his information to identify your	case:			
Debtor	1 Michael Wallner				v
THE SPECIAL ADDRESS	First Name	Middle Name	Last Name		
Debtor : (Spouse if		Middle Name	Last Name	3	v
United S	States Bankruptcy Court for the:	CENTRAL DISTRICT OF	CALIFORNIA		
Case nu (if known)	ımber			÷,	☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	ebtors			12/15
people a ill it out, our nan 1. D	and number the entries in the ne and case number (if known) o you have any codebtors? (If	ally responsible for supply boxes on the left. Attach to . Answer every question.	ring correct informatio he Additional Page to	on. If more space is r this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
	_				
Y	es				
	ithin the last 8 years, have you ona, California, Idaho, Louisiana,				
ПΝ	o. Go to line 3.				
■ Y	es. Did your spouse, former spou	se, or legal equivalent live w	ith you at the time?		
	■ No				
	☐ Yes.				
	In which community state	or territory did you live?	-NONE-	. Fill in the name an	nd current address of that person.
	Name of your spouse, former spo Number, Street, City, State & Zip				
in lin Form	olumn 1, list all of your codebto e 2 again as a codebtor only if	ors. Do not include your sp that person is a guarantor	r or cosigner. Make su	re you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZIF	Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1	Cynthia Ann Wallner 1653 Kendall Drive San Bernardino, CA 92407 This is the Debtor's 87 yea and qualifies as the Debtor		at this address	☐ Schedule D, lin☐ Schedule E/F, ■ Schedule GRon and Toni Ho	line 2.1

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1	ll in this information to identify your	case:		A PROPERTY OF					
De	ebtor 1 Michael Wa	allner			-				
	ebtor 2 pouse, if filing)								
Ur	nited States Bankruptcy Court for th	e: CENTRAL DISTRICT	Γ OF CALIFORNIA						
	ase number known)		_				ed filing ent show	ving postpetition e following date:	chapter
	fficial Form 106l					MM / DD/ Y	YYYY		
S	chedule I: Your Inc	ome							12/15
sup spc atta	as complete and accurate as pos plying correct information. If you buse. If you are separated and you ich a separate sheet to this form. The describe Employment	are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your sith you, do not include	spouse de infor	is liv mati	ing with you, incl on about your sp	ude info ouse. If i	ormation about more space is r	your leeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non	-filing spouse	
	If you have more than one job,	Employment status	Employed			☐ Empl	oyed		
information about additional		Employment status	☐ Not employed		☐ Not e	☐ Not employed			
	employers.	Occupation	Dietary Supervis	or					
		Employer's name	Legacy Health C	are Ce	nte				
	Include part-time, seasonal, or self-employed work.								
		Employer's address	1570 North Fair Pasadena, CA 9		ver	ue			
	self-employed work. Occupation may include student	Employer's address How long employed tl	Pasadena, CA 9	1103	ver	ue			
Par	self-employed work. Occupation may include student	How long employed th	Pasadena, CA 9	1103	ver	ue			
Sti	self-employed work. Occupation may include student or homemaker, if it applies.	How long employed that	Pasadena, CA 9 here? 6 month	1103 s			space. I	nclude your non	filing
sti pou	self-employed work. Occupation may include student or homemaker, if it applies. t 2: Give Details About Mormate monthly income as of the details and the details are suggested.	How long employed the state you file this form. If your end one employer, co	Pasadena, CA 9 here? 6 month you have nothing to re	1103	any i	ine, write \$0 in the			-
sti pou	occupation may include student or homemaker, if it applies. Give Details About Mormate monthly income as of the dise unless you are separated. u or your non-filing spouse have more	How long employed the state you file this form. If your end one employer, co	Pasadena, CA 9 here? 6 month you have nothing to re	1103	any i	ine, write \$0 in the	n on the		-
Esti pou f you nore	occupation may include student or homemaker, if it applies. Give Details About Mormate monthly income as of the dise unless you are separated. u or your non-filing spouse have more	How long employed the state you file this form. If you file this form. If you file than one employer, countries form.	Pasadena, CA 9 here? 6 month you have nothing to re mbine the information	1103	any i	ine, write \$0 in the	n on the	lines below. If yo	-
sti pou	self-employed work. Occupation may include student or homemaker, if it applies. t 2: Give Details About Mormate monthly income as of the dayse unless you are separated. u or your non-filing spouse have more space, attach a separate sheet to be because the control of the co	How long employed the state you file this form. If you file this form, if you file than one employer, countries form.	Pasadena, CA 9 here? 6 month you have nothing to re mbine the information	port for all e	any l	ine, write \$0 in the eyers for that perso For Debtor 1	For D	lines below. If you	-

De	btor 1	Michael Wallner	_	C	ase number (if known)	_			
	Com	w line 4 hore	4		For Debtor 1	Mental	10011	g spouse	
	Cop	by line 4 here	4.		\$3,600.00		\$	N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 835.50		\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$0.00		\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00		\$	N/A	
	5d. 5e.	Required repayments of retirement fund loans	5d. 5e.		\$ 0.00 \$ 0.00		\$	N/A	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.		\$ 0.00 \$ 0.00		\$	N/A N/A	
	5g.	Union dues	5g.		0.00		\$	N/A	
	5h.	Other deductions. Specify:	5h.+				\$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	835.50		\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,764.50		\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	9	0.00	-	\$	N/A	
	8b.	Interest and dividends	8b.	9			\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.	\$	0.00	;	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	1	\$	N/A	
	8e.	Social Security	8e.	\$	0.00		\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	;	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	!	\$	N/A	
	J	Debtor's Mother pays part of the							
	8h.	Other monthly income. Specify: rent at 1653 Kendall Drive	_ 8h.+	\$	575.00	+ 5	\$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	575.00	5	\$	N/A	
10.		ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,339.50 + \$_		N/A	A = \$ _ 3	,339.50
11.	Includ other	all other regular contributions to the expenses that you list in Schedule le contributions from an unmarried partner, members of your household, your friends or relatives. It include any amounts already included in lines 2-10 or amounts that are not a fy:	depend				in <i>Sched</i>	ule J. I. +\$	0.00
2.		he amount in the last column of line 10 to the amount in line 11. The resing that amount on the Summary of Schedules and Statistical Summary of Certains						2. \$3	,339.50
3.	Do yo	ou expect an increase or decrease within the year after you file this form?	?					monthly i	
		No.			11/4-14				
	1 1	YAS EVOIDIN'							1

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Fill i	n this informa	tion to identify y	our case:						
Debte	or 1	Michael Wa	llner		o .	(Che	ck if this is:	
Debto	or 2 use, if filing)								wing postpetition chapter the following date:
Unite	d States Bankr	uptcy Court for the	e: CENTI	RAL DISTRICT OF CALIF	ORNIA			MM / DD / YYYY	
	number								
(If kno									
Off	ficial Fo	rm 106J							
		J: Your							12/1
infor	mation. If mo		eded, atta	 If two married people a ach another sheet to this in. 					
Part 1		be Your House	ehold						
	Is this a join No. Go to								
			in a separ	ate household?					
	□ No		•						
	☐ Ye	s. Debtor 2 mus	st file Offic	ial Form 106J-2, <i>Expense</i>	s for Separate Housel	hold of D	Deb	tor 2.	
2. I	Do you have	dependents?	□ No						
	Do not list De Debtor 2.	btor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor)	Dependent's age	Does dependent live with you?
Ī	Do not state t	he			Exception Patricina, total participation processor activities and activities		TOP and sold life in		□ No
C	dependents n	ames.			Mother			87	Yes
									□ No □ Yes
						-		> 0	□ No
									□ Yes
									□ No
									☐ Yes
е	expenses of	nses include people other thy your depender	nan 🗖	No Yes					
Part 2		te Your Ongoir							
expen				iptcy filing date unless y is filed. If this is a supp					
				government assistance i luded it on Schedule I:)					
	ial Form 106		i nave inc	iudea it on <i>Schedule I. 1</i>	our income			Your expe	nses
		home ownersh any rent for the		ses for your residence. I	nclude first mortgage	4.	\$		1,150.00
lf	not included	d in line 4:							
4	a. Real est	ate taxes				4a.	\$		0.00
		, homeowner's				4b.	100		0.00
40				okeep expenses		4c.			0.00
- 4α 5 - Δ		ner's association		ominium dues u r residence, such as hoi	me equity loans	4d. 5.			0.00
, A	uulliviiai iilo	rigage payille	III OI YU	ui iesiuciice, sucii as ilui	ine equity idalis	J.	Ψ		U.UU

Deb	otor 1	Michael Wallner	Case nun	nber (if known)	
6.	Utilit	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	75.00
	6b.	Water, sewer, garbage collection	6b.	\$	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	212.00
	6d.	Other. Specify: Gas	6d.	\$	45.00
		Cable		\$	127.00
7.	Food	and housekeeping supplies		\$	300.00
8.		dcare and children's education costs	8.	·	0.00
9.		ning, laundry, and dry cleaning	9.		200.00
		onal care products and services	10.		150.00
		cal and dental expenses	11.		4.00
		sportation. Include gas, maintenance, bus or train fare.	11.	·	4.00
12.		of include car payments.	12.	\$	425.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.		itable contributions and religious donations	14.	\$	0.00
	Insur			· —	-
		ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	\$	0.00
	15c.	Vehicle insurance	15c.	\$	120.00
	15d.	Other insurance. Specify:	15d.	\$	0.00
16.		s. Do not include taxes deducted from your pay or included in lines 4 or 20.	-		
	Speci	fy:	16.	\$	0.00
17.		lment or lease payments:		S	*
	17a.	Car payments for Vehicle 1	17a.		771.00
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
	17c.	Other. Specify:	17c.	\$	0.00
		Other. Specify:	17d.	\$	0.00
		payments of alimony, maintenance, and support that you did not report as	40	•	0.00
		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
19.		payments you make to support others who do not live with you.	40	\$	0.00
	Specif		19.		
		real property expenses not included in lines 4 or 5 of this form or on Sche	<i>auie i: Yo</i> 20a.		0.00
		Mortgages on other property Real estate taxes	20a. 20b.		0.00
		Property, homeowner's, or renter's insurance	20b. 20c.		
			20d.		0.00
		Maintenance, repair, and upkeep expenses	20d. 20e.		0.00
		Homeowner's association or condominium dues			0.00
21.	Other:	: Specify:	21.	+\$	0.00
22.	Calcul	late your monthly expenses			
		dd lines 4 through 21.		\$	3,579.00
		copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$, , , , , , , , , , , , , , , , , , , ,
		dd line 22a and 22b. The result is your monthly expenses.		\$	3,579.00
	A	ad and 220. The result is your monthly expenses.			0,010.00
		late your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,339.50
	23b. (Copy your monthly expenses from line 22c above.	23b.	-\$	3,579.00
			١		
:		Subtract your monthly expenses from your monthly income.	22-	¢	-239.50
	-	The result is your monthly net income.	23c.	\$	-235.50
1	For exa	u expect an increase or decrease in your expenses within the year after you mple, do you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage?	u file this mortgage p	form? ayment to increase of	or decrease because of a
		Evnlain here:			and the second
1	∏ Yes	Explain here:			

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Fill in this inform	nation to identify your	case:			
Debtor 1	Michael Wallner				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	kruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case number (if known)					☐ Check if this is an amended filing
Official Form Declarati		ın Individual	Debtor's Scl	hedules	12/15
		I ad	71.1		
t two married peo	ple are filing together	, both are equally respoi	nsible for supplying corre	ect information.	
obtaining money		connection with a bank			ement, concealing property, or 00, or imprisonment for up to 20
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attori	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes. Na	me of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	of perjury, I declare t	hat I have read the sumr	nary and schedules filed	with this declaration	on and
MIC	mo 1 h	Ochor	.,		
X Michael	Wallner		X Signature of D	ebtor 2	
Signature	of Debtor 1				
$_{Date}$	20-21		Date		

	B#!-11347 U	2			
· -	Michael Wallner First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankro	uptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case number				_	
(if known)					Check if this is an amended filing
Official Form	107				
Statement of	f Financial .	Affairs for Indivi	duals Filing for E	Bankruptcy	4/
e as complete and	accurate as possi	ble. If two married people	are filing together, both are	equally responsible for sup	oplying correct
nformation. If more lumber (if known). A			this form. On the top of ar	y additional pages, write yo	ur name and case
Part 1: Give Deta	ils About Your Ma	rital Status and Where Yo	u Lived Before		
	rrent marital statu				
. What is your cu	rrent maritai statu	15 ?			
☐ Married					
Not married					
During the last 3	years, have you	lived anywhere other than	where you live now?		
□ No					
Yes. List all	of the places you li	ved in the last 3 years. Do n	ot include where you live nov	I.	
Debtor 1 Prior A	\ddress:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
1551 Fact Mar	rshall Blvd. no, CA 92404	From-To: 2002-2012	☐ Same as Debtor	Ĭ	☐ Same as Debtor 1 From-To:
San Bernardir					
San Bernardir Within the last 8 lates and territories in No Yes. Make si	years, did you eve clude Arizona, Cali ure you fill out Sche	ifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ity property state or territor co, Texas, Washington and V	
San Bernardir Within the last 8 tates and territories in No Yes. Make s	years, did you evo	ifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R		
Within the last 8 ates and territories in No Yes. Make so art 2 Explain the Did you have any Fill in the total am	years, did you ever clude Arizona, Cali ure you fill out Sche e Sources of Your to income from empount of income you	edule H: Your Codebtors (O Income ployment or from operating received from all jobs and a	rvada, New Mexico, Puerto R	co, Texas, Washington and V	Visconsin.)
Within the last 8 ates and territories in No Yes. Make so art 2 Explain the Did you have any Fill in the total am	years, did you ever clude Arizona, Cali ure you fill out Sche e Sources of Your to income from empount of income you	edule H: Your Codebtors (O Income ployment or from operating received from all jobs and a	fficial Form 106H). g a business during this yeal businesses, including part	co, Texas, Washington and V	Visconsin.)
Within the last 8 ates and territories in Yes. Make so art 2 Explain the Did you have any Fill in the total ame If you are filing a jump.	years, did you ever clude Arizona, Cali ure you fill out Sche e Sources of Your y income from empount of income you point case and you h	edule H: Your Codebtors (O Income ployment or from operating received from all jobs and a	fficial Form 106H). g a business during this yeal businesses, including part	co, Texas, Washington and V	Visconsin.)
Within the last 8 ates and territories in No Yes. Make so art 2 Explain the Did you have any Fill in the total amilf you are filing a journ of the source	years, did you ever clude Arizona, Cali ure you fill out Sche e Sources of Your y income from empount of income you oint case and you had	edule H: Your Codebtors (O Income ployment or from operating received from all jobs and a	fficial Form 106H). g a business during this yeal businesses, including part	co, Texas, Washington and V	Visconsin.)
Within the last 8 lates and territories in No No Yes. Make so Part 2 Explain the Did you have any Fill in the total amilf you are filling a journ of the No	years, did you ever clude Arizona, Cali ure you fill out Sche e Sources of Your ounce from empount of income you oint case and you had	ifornia, Idaho, Louisiana, Ne edule H: Your Codebtors (O Income ployment or from operatin received from all jobs and a nave income that you receive	fficial Form 106H). g a business during this yeal businesses, including part	co, Texas, Washington and V ear or the two previous caled time activities. der Debtor 1.	Visconsin.)
Within the last 8 ates and territories in No Yes. Make so art 2 Explain the Did you have any Fill in the total amilf you are filing a journ of the Did you are filing a journ o	years, did you ever clude Arizona, Cali ure you fill out Schee Sources of Your income from empount of income you oint case and you have details.	edule H: Your Codebtors (O Income ployment or from operating received from all jobs and a mave income that you received Debtor 1 Sources of income	fficial Form 106H). In a business during this yeall businesses, including parter together, list it only once ure together together together.	co, Texas, Washington and V ar or the two previous caletime activities. der Debtor 1. Debtor 2 Sources of income	dross income (before deductions

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Debtor 1 Michael Wallner		Cas	e number (if known)	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2020)	■ Wages, commissions, bonuses, tips	\$41,000.00	☐ Wages, commissions bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2019)	■ Wages, commissions, bonuses, tips	\$965.33	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		Operating a business	
List each source and the gross in ☐ No ■ Yes. Fill in the details.	come from each source separa	tely. Do not include income tl	nat you listed in line 4.	
	And the second section of the second			
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year unti the date you filed for bankruptcy:	Debtor's Mother pays one half of the rent.	\$2,300.00		
For last calendar year: (January 1 to December 31, 2020)	Debtor's Mother pays one half of the rent.	\$6,900.00		
For the calendar year before that: (January 1 to December 31, 2019)	Unemployment	\$16,890.00		
	Debtor's Mother pays one half of the rent.	\$6,900.00		,
Part 3: List Certain Payments You	u Made Before You Filed for B	Bankruptcv	•	
			2	
. Are either Debtor 1's or Debtor 2 ☐ No. Neither Debtor 1 nor individual primarily for	2's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol	mer debts. Consumer debts	are defined in 11 U.S.C. §	101(8) as "incurred by an
During the 90 days bef	ore you filed for bankruptcy, did	d you pay any creditor a total	of \$6.825* or more?	
□ No. Go to line		- j - paj anj oroanor a totar	Jan	
☐ Yes List below paid that c	each creditor to whom you paid reditor. Do not include payment	ts for domestic support obliga		
not include * Subject to adjustmer	e payments to an attorney for th nt on 4/01/22 and every 3 years	is bankruptcy case. after that for cases filed on c	or after the date of adjustme	nt.

Case 6:21-bk-12487-SC Doc 1 Filed 05/03/21 Entered 05/03/21 23:21:16 Main Document Page 38 of 54 Case number (if known) Debtor 1 Michael Wallner Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. 3 No ☐ Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Reason for this payment Dates of payment Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number Michael A. Wallner vs. Cavalry San Bernardino Superior Complaint for Pending **Portfolio Services Common Counts** Court ☐ On appeal CIV SB 2105348 Attorney: Matthew **Civil Division** ☐ Concluded W. Quail, SBN: 247 West Third Street 183759 San Bernardino, CA Quail Cardot, LLP 92415-0210 205 E. River Park Circle, # 110 Fresno, CA 93720 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the **Creditor Name and Address** Describe the Property Date property Explain what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your

Case 6:21-bk-12487-SC Doc 1 Filed 05/03/21 Entered 05/03/21 23:21:16 Main Document Page 39 of 54 Case number (if known) Debtor 1 Michael Wallner accounts or refuse to make a payment because you owed a debt? the No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Describe the gifts Gifts with a total value of more than \$600 Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ■ No ☐ Yes. Fill in the details. Describe the property you lost and Date of your Value of property Describe any insurance coverage for the loss how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

Description and value of any property

☐ No

Yes. Fill in the details.

Person Who Was Paid Address Email or website address

transferred

U.S. Dollars

Date payment or transfer was Amount of payment

made

February 17,

\$1,200.00

2021

Frank R. Sariol, P.C.

1820 East First Street, Suite 200

Person Who Made the Payment, if Not You

Santa Ana, CA 92705 mail@sariol.com

Debtor

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D	ebtor 1 Michael Wallner		Ca	se number (if known)	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	d value of any proper	ty Date paymer or transfer w made	
	D.E.C.A.F. Credit Counseling Courses 112 Goliard Street Fort Worth, TX 76126 www.DECAFnow.com Debtor	U.S. Dollars		February 28 2021	3, \$25.00
	CIN Credit Reports 410 Exchange Irvine, CA 92602 www.stretto.com Debtor	U.S. Dollars		March 1, 20	21 \$60.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li	or to make paymen		ehalf pay or transfer any բ	property to anyone who
	■ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address	Description and transferred	value of any property	y Date paymen or transfer wa made	
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already because of the course of the co	iness or financial af e as security (such as	fairs? the granting of a secu		
	■ No □ Yes. Fill in the details.				
	Person Who Received Transfer	Description and	value of	Describe any property or	Date transfer was
	Address Person's relationship to you	property transfe	rred	payments received or deb paid in exchange	
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No Yes. Fill in the details.		ny property to a self-	settled trust or similar de	vice of which you are a
	Name of trust	Description and	value of the property	transferred	Date Transfer was made
Par	18: List of Certain Financial Accounts, Instru	uments, Safe Depos	it Boxes, and Storage	Units	
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associate	ther financial accou	ints; certificates of de		
	■ No				
	☐ Yes. Fill in the details.				
		ast 4 digits of ecount number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

Case 6:21-bk-12487-SC Doc 1 Filed 05/03/21 Entered 05/03/21 23:21:16 Main Document Page 41 of 54 Case number (if known) Debtor 1 Michael Wallner 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No No ☐ Yes. Fill in the details. Name of Financial Institution Describe the contents Do vou still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Do you still Name of Storage Facility Who else has or had access Describe the contents Address (Number, Street, City, State and ZIP Code) have it? to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. 780 No Yes. Fill in the details. Owner's Name Describe the property Value Where is the property? (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? 1 No ☐ Yes. Fill in the details. Governmental unit Environmental law, if you Date of notice Name of site Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material?

No

Name of site

Yes. Fill in the details.

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

Case 6:21-bk-12487-SC Doc 1 Filed 05/03/21 Entered 05/03/21 23:21:16 Page 42 of 54 Main Document Case number (if known) Debtor 1 Michael Wallner 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No. Yes. Fill in the details below. Date Issued Name Address (Number, Street, City, State and ZIP Code)

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Fill in this inform	nation to identify your	case:	Gradulphic Market			
Debtor 1	Michael Wallner					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA			
Case number						
(if known)					☐ Check if this is an	
					amended filing	
Official For	rm 107					
		ffaire for Indiv	iduals Filing for	Rankruntcy		4/1
Statement	Of Fillaticial P	ilialis ioi iliuiv	iduals Filling for	Банкі црісу		4/
information. If m	ore space is needed, a n). Answer every quest	ttach a separate sheet t	e are filing together, both a to this form. On the top of a	any additional pages,	write your name and case)
Part 12: Sign B	elow	The second of th				
are true and corre with a bankruptcy	ect. I understand that n	naking a false statemen	and any attachments, and I it, concealing property, or c prisonment for up to 20 yea	obtaining money or pr		
Michael Wallne	r	Signa	ature of Debtor 2			
Signature of Deb						
Date 4	90-91	Date				
Did you attach ad ■ No □ Yes	ditional pages to <i>Your</i>	Statement of Financial	Affairs for Individuals Filin	g for Bankruptcy (Offi	icial Form 107)?	
Did you pay or ag	ree to pay someone w	no is not an attorney to	help you fill out bankruptc	y forms?		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your case:	The state of the s	
Debtor 1	Michael Wallner		
Debtor 2	First Name Middle Name	Last Name	
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Bar	kruptcy Court for the: CENTRAL DIST	TRICT OF CALIFORNIA	
Case number (if known)			☐ Check if this is an amended filing
Official For	m 108		
<u>Statemen</u>	t of Intention for Indi	ividuals Filing Under Chapter	7 12/15
vou are an indiv	idual filing under chapter 7, you must	fill out this form if:	
	claims secured by your property, or		
you have lease	d personal property and the lease has	not expired.	
ou must file this	form with the court within 30 days afte er is earlier, unless the court extends t	er you file your bankruptcy petition or by the date set f the time for cause. You must also send copies to the c	
	ple are filing together in a joint case, b date the form.	poth are equally responsible for supplying correct info	rmation. Both debtors must
		is needed, attach a separate sheet to this form. On the	top of any additional pages,
	id accurate as possible. If more space ir name and case number (if known).	is needed, attach a separate sheet to this form. On the	e top of any additional pages,
write you			e top of any additional pages,
write you Part 1: List You	r name and case number (if known).	5	
write you Part 1: List You For any creditor information belo	or name and case number (if known). The Creditors Who Have Secured Claims So that you listed in Part 1 of Schedule Sow.	D: Creditors Who Have Claims Secured by Property (C	Official Form 106D), fill in the
write you Part 1: List You For any creditor information belo	ir name and case number (if known). Ir Creditors Who Have Secured Claims s that you listed in Part 1 of Schedule	5	
write you Part 1: List You For any creditor information belo	or name and case number (if known). The Creditors Who Have Secured Claims So that you listed in Part 1 of Schedule Sow.	D: Creditors Who Have Claims Secured by Property (C What do you intend to do with the property that	Official Form 106D), fill in the Did you claim the property
write you Part 1: List You For any creditor information belo Identify the cred	Ir name and case number (if known). Ir Creditors Who Have Secured Claims Is that you listed in Part 1 of Schedule Is that you listed in Part 1 of Schedul	D: Creditors Who Have Claims Secured by Property (C What do you intend to do with the property that secures a debt?	Official Form 106D), fill in the Did you claim the property
write you Part 1: List You For any creditor information belo	or name and case number (if known). The Creditors Who Have Secured Claims So that you listed in Part 1 of Schedule Sow.	D: Creditors Who Have Claims Secured by Property (C What do you intend to do with the property that	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C?
write you Part 1: List You For any creditor information below the creditor's Cal	or name and case number (if known). If Creditors Who Have Secured Claims as that you listed in Part 1 of Schedule ow. It is and the property that is collateral poital One Auto Finance	D: Creditors Who Have Claims Secured by Property (Construction of the Construction of	Official Form 106D), fill in the Did you claim the property as exempt on Schedule C?
For any creditor information belontify the creditor's Caname:	or name and case number (if known). If Creditors Who Have Secured Claims as that you listed in Part 1 of Schedule ow. It is and the property that is collateral poital One Auto Finance	D: Creditors Who Have Claims Secured by Property (C What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C?
For any creditor information belo Identify the cred Creditor's Calname: Description of	or name and case number (if known). If Creditors Who Have Secured Claims as that you listed in Part 1 of Schedule ow. It is and the property that is collateral poital One Auto Finance	D: Creditors Who Have Claims Secured by Property (Compared to the property of the secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C?
Part 1: List You For any creditor information beloa identify the cred Creditor's Calname: Description of property securing debt:	or name and case number (if known). If Creditors Who Have Secured Claims as that you listed in Part 1 of Schedule ow. itor and the property that is collateral poital One Auto Finance Automobile	D: Creditors Who Have Claims Secured by Property (Compared to the property of the secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Keep Making Payments	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C?
Part 1: List You For any creditor information belon information information of property securing debt: Part 2: List You or any unexpired	Ir name and case number (if known). Ir Creditors Who Have Secured Claims Is that you listed in Part 1 of Schedule It own. It it is collateral	D: Creditors Who Have Claims Secured by Property (Compared to the property of the secures and the property. Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Keep Making Payments In Schedule G: Executory Contracts and Unexpired Legisters.	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes
Part 1: List You For any creditor information belof Identify the cred Creditor's Cap name: Description of property securing debt: Part 2: List You or any unexpired the information belof to the control of the contr	r Unexpired Personal Property Leases personal property lease that you listed property lease that you listed property lease that you listed in Part 1 of Schedule property that is collateral property that is collateral property that is collateral property lease that you listed property lease that you listed property.	D: Creditors Who Have Claims Secured by Property (Compared to the property of the secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Keep Making Payments	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes
Part 1: List You For any creditor information below Identify the cred Creditor's Cap name: Description of property securing debt: Part 2: List You or any unexpired the information is purely assume a securing and assume a securing a securi	r Unexpired Personal Property Leases personal property lease that you listed property lease that you listed property lease that you listed in Part 1 of Schedule property that is collateral property that is collateral property that is collateral property lease that you listed property lease that you listed property.	D: Creditors Who Have Claims Secured by Property (C What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Keep Making Payments d in Schedule G: Executory Contracts and Unexpired Inexpired leases are leases that are still in effect; the left the trustee does not assume it. 11 U.S.C. § 365(p)(2).	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes
Creditor's Caname: Description of property securing debt: Part 2: List You or any unexpired the information is pour any unexpired the information is pour any assume any assume and the information is pour any assume any ass	ar name and case number (if known). In Creditors Who Have Secured Claims Is that you listed in Part 1 of Schedule Is that you listed in Part 1 of Schedule Is to and the property that is collateral Is collateral In the property that is collateral In the property that is collateral Is collateral In the property that is collateral Is collateral In the property that is collateral Is collateral In the property Leases In the property Leases Is collateral In the property Leases In the property Leases Is collateral In the property Leases Is collateral In the property Leases Is collateral In the property Leases In the property Leases Is collateral In the property Leases In the property Lease if the	D: Creditors Who Have Claims Secured by Property (Co. What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Keep Making Payments d in Schedule G: Executory Contracts and Unexpired In expired leases are leases that are still in effect; the left the trustee does not assume it. 11 U.S.C. § 365(p)(2).	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes Leases (Official Form 106G), file case period has not yet ended.
Creditor's Capname: Description of property securing debt:	ar name and case number (if known). In Creditors Who Have Secured Claims Is that you listed in Part 1 of Schedule Is that you listed in Part 1 of Schedule Is that you listed in Part 1 of Schedule Is to and the property that is collateral Is collateral In the property Leases In the property Leases Is collateral In the property Leases In the property Lease if the property Lease if the property Lease if the property Leases In the property Lease if the property Lease is the property Lease if the property Lease if the property Lease is the property Lease is the proper	D: Creditors Who Have Claims Secured by Property (Co. What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Keep Making Payments d in Schedule G: Executory Contracts and Unexpired In expired leases are leases that are still in effect; the left the trustee does not assume it. 11 U.S.C. § 365(p)(2).	Difficial Form 106D), fill in the Did you claim the property as exempt on Schedule C? No Yes Leases (Official Form 106G), fill ease period has not yet ended.
Creditor's Capname: Description of property securing debt:	ar name and case number (if known). In Creditors Who Have Secured Claims Is that you listed in Part 1 of Schedule Is that you listed in Part 1 of Schedule Is that you listed in Part 1 of Schedule Is to and the property that is collateral Is collateral In the property Leases In the property Leases Is collateral In the property Leases In the property Lease if the property Lease if the property Lease if the property Leases In the property Lease if the property Lease is the property Lease if the property Lease if the property Lease is the property Lease is the proper	D: Creditors Who Have Claims Secured by Property (Co. What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Keep Making Payments d in Schedule G: Executory Contracts and Unexpired In expired leases are leases that are still in effect; the left the trustee does not assume it. 11 U.S.C. § 365(p)(2).	Did you claim the property as exempt on Schedule C? No Yes Leases (Official Form 106G), fill ease period has not yet ended.

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Fill in this infor	mation to identify your	case:			
Debtor 1	Michael Wallner				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
		OFNITRAL DIGITALOT O	NE CALIFORNIA		
United States Ba	inkruptcy Court for the:	CENTRAL DISTRICT C	OF CALIFORNIA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	rm 108				
Statemer	nt of Intentio	n for Individເ	ials Filing Und	der Chapter	7 12/15
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.					
x Much	ail Wall	hal	X		
Michael W	allner	The second secon	Signature of Del	btor 2	
Signature of	Debtor 1				
Date 4	-20 21		Date		

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B2030 (Form 2030) (12/15)

6.

United States Bankruptcy Court Central District of California

In	re Michael Wallner		Case No.	
***	Internation of the state of the	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENS	SATION OF ATTORNE	Y FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or	of the petition in bankruptcy, or ag	reed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,200.00
	Prior to the filing of this statement I have received		\$	0.00
	Balance Due		\$	1,200.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compens	ation with any other person unless	they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names			
5.	In return for the above-disclosed fee, I have agreed to rende	r legal service for all aspects of the	e bankruptcy ca	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statement c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	ent of affairs and plan which may be and confirmation hearing, and any uce to market value; exemption as needed; preparation and f	ne required; adjourned hear on planning;	ings thereof; preparation and filing of
6.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any dischany other adversary proceeding.			s, relief from stay actions or
_	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.	Frank R. Sariol, Esq., 1 Signature of Attorney Frank R. Sariol, PC, db. 1820 East First Street Suite 200 Santa Ana, CA 92705 714-953-4700 Fax: 714 mail@sariol.com Name of law firm	40406 a Sariol Lega	

Fi	ll in this information to identify your case:			C	Check	one box only as	directed in this form and in For	m
De	ebtor 1 Michael Wallner			1	22A-1	Supp:		
	ebtor 2				1 .	There is no pre	sumption of abuse	
Ur	nited States Bankruptcy Court for the: Central District of C	Califor	nia		□ 2.	applies will be	to determine if a presumption of made under <i>Chapter 7 Means</i> ficial Form 122A-2).	
	ase number				□ 3.	The Means Tes	t does not apply now because y service but it could apply late	
					Пο	heck if this is	an amended filing	
O.	fficial Form 122A - 1							
CI	hapter 7 Statement of Your Cur	ren	t Mo	nthly In	con	1 е		04/2
atta cas qua Pa	as complete and accurate as possible. If two married people as ch a separate sheet to this form. Include the line number to when the line number to when the life was a separate sheet to this form. Include the line number to when the life was a separate from the life was a separate from the life was a separate with the life was a separate was a separ	nich th n a pre ion fro	e additio	nal information n of abuse beca	applie use yo	s. On the top of a u do not have pri	ny additional pages, write your n marily consumer debts or because	name and se of
	Not married. Fill out Column A, lines 2-11.							
	☐ Married and your spouse is filing with you. Fill out	both	Columns	s A and B, lines	s 2-11.	•		
	☐ Married and your spouse is NOT filing with you. Y	ou an	d your	spouse are:				
	\square Living in the same household and are not legal	y sep	arated.	Fill out both Co	olumn	s A and B, lines	2-11.	
	☐ Living separately or are legally separated. Fill o penalty of perjury that you and your spouse are le living apart for reasons that do not include evading	gally s	eparate	d under nonba	nkrupt	cy law that appli	es or that you and your spouse	ander are
1 ti	Fill in the average monthly income that you received from all s 01(10A). For example, if you are filing on September 15, the 6-mo he 6 months, add the income for all 6 months and divide the total b spouses own the same rental property, put the income from that pro	nth per y 6. Fil	iod would I in the re	be March 1 thro sult. Do not inclu	ough Au ide any	igust 31. If the am income amount m	ount of your monthly income varied ore than once. For example, if both	during
						mn A tor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	nd co	mmissi	ons (before all	\$	3,600.00	\$	
3.	Alimony and maintenance payments. Do not include p Column B is filled in.	aymeı	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pair of you or your dependents, including child support. I from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo filled in. Do not include payments you listed on line 3.	nclude your d	e regular lepende	contributions nts, parents,	\$	575.00	\$	
5.	Net income from operating a business, profession, o	farm						
				tor 1				
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00		_	0.00	•	
	Net monthly income from a business, profession, or farm	\$	0.00	Copy here ->	· \$	0.00	\$	
6.	Net income from rental and other real property		5 .1	44				
		c		tor 1				
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					

Official Form 122A-1

0.00 Copy here -> \$

\$

0.00

0.00

\$

\$

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

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Debto	r1 <u>Mic</u>	chael Wallner			Case number	(if known)			
			9		Column A Debtor 1		Column B Debtor 2 non-filing	or	j S
8.	Unemplo	pyment compensation			\$	0.00	\$		
	Do not er	nter the amount if you contend that the amount Security Act. Instead, list it here:	nt received was a bene	fit under					
	For yo	u	\$ 0.	00					
	For yo	ur spouse	\$						
10. I	Pension benefit ur not include United St disability, pay paid does not if retired to Income for the under the coronavirus crime, a compensa Governme	or retirement income. Do not include any a nater the Social Security Act. Also, except as alle any compensation, pension, pay, annuity, ates Government in connection with a disability or death of a member of the uniformed service under chapter 61 of title 10, then include that exceed the amount of retired pay to which younder any provision of title 10 other than chapter of any benefits received under the Social Federal law relating to the national emergen National Emergencies Act (50 U.S.C. 1601 of us disease 2019 (COVID-19); payments received under the Social regencies and in the social service and the social federal law relating to the national emergen and its disease 2019 (COVID-19); payments received under the social federal payments received under the social federal law relating to the national emergen and disease 2019 (COVID-19); payments received under the social federal payments received under the social fe	mount received that wa stated in the next sente or allowance paid by the lity, combat-related injurces. If you received any pay only to the extent the would otherwise be exter 61 of that title. Decify the source and an Security Act; payments cay declared by the Present to the would otherwise to the seq.) with respect to the seq. If	nce, do e ry or retired hat it ntitled mount. made sident the ar	\$	0.00	\$		
		member of the uniformed services. If necest page and put the total below	sary, list other sources	on a					
3	eparate i	ů ,			\$	0.00	\$		
	_				\$	0.00	\$		
	_	otal amounts from separate pages, if any.		— +	\$	0.00	\$		
		otal amounts from separate pages, if any.			<u> </u>	0.00		7	
		your total current monthly income. Add line mn. Then add the total for Column A to the to		\$	4,175.00	+ \$		Total of incom	4,175.00
art 2	Det	termine Whether the Means Test Applies t	to You					ilicom	е
12. C	Calculate	your current monthly income for the year	. Follow these steps:						
1	2а. Сору	your total current monthly income from line	11		Сору	line 11 h	ere=>	\$	4,175.00
	Multip	oly by 12 (the number of months in a year)						X 1	
1.	2b. The r	esult is your annual income for this part of the	e form				121	D. \$	50,100.00
13. C	alculate	the median family income that applies to	you. Follow these steps	s:					
F	ill in the s	tate in which you live.	CA						
F	ill in the n	umber of people in your household.	2						
Т	o find a lis	nedian family income for your state and size st of applicable median income amounts, go n. This list may also be available at the bank	online using the link sp	ecified ir	n the separate	e instructi	13. ons	\$8	32,418.00
14. H	ow do th	e lines compare?							
14	4a.	Line 12b is less than or equal to line 13. Of Go to Part 3. Do NOT fill out or file Official		ck box 1	1, There is no	presump	tion of abus	se.	
14	4b. □	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.		The pres	sumption of a	buse is d	etermined b	y Form 12	22A-2.

Fill in this inform	nation to identify your case:	Chec
Debtor 1	Michael Wallner	122A
Debtor 2 (Spouse, if filing)		
United States B	ankruptcy Court for the: Central District of California	
Case number (if known)		

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

04/20

Part 3:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

michael walker

Michael Wallner

Signature of Debtor 1

Date 04 20 202 | MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Frank R. Sariol, Esq., 140406 1820 East First Street Suite 200 Santa Ana, CA 92705 714-953-4700 Fax: 714-442-2440 California State Bar Number: 140406 CA mail@sariol.com	FOR COURT USE ONLY
☐ Debtor(s) appearing without an attorney	
Attorney for Debtor	
- Allomoy for Doblor	
19-9-77 (5.10 % NOW)	ANKRUPTCY COURT ICT OF CALIFORNIA
In re:	CASE NO.:
Michael Wallner	CHAPTER: 7
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attornaster mailing list of creditors filed in this bankruptcy case, consistent with the Debtor's schedules and I/we assume all r	consisting of 3 sheet(s) is complete, correct, and
Date:	Signature of Debtor 2 (joint debtor)) (if applicable)
Date:	See Next page Signature of Attorney for Debtor (if applicable)

Case 6:21-bk-12487-SC Doc 1 Filed 05/03/21 Entered 05/03/21 23:21:16 Desc Main Document Page 51 of 54

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Frank R. Sariol, Esq., 140406 1820 East First Street Suite 200 Santa Ana, CA 92705 714-953-4700 Fax: 714-442-2440 California State Bar Number: 140406 CA mail@sariol.com	FOR COURT USE ONLY
□ Debtor(s) appearing without an attorney ■ Attorney for Debtor	
Altorney for Debitor	
CENTRAL DISTR	BANKRUPTCY COURT ICT OF CALIFORNIA
In re: Michael Wallner	CASE NO.: CHAPTER: 7
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attormaster mailing list of creditors filed in this bankruptcy case, consistent with the Debtor's schedules and I/we assume all r	consisting of <u>4</u> sheet(s) is complete, correct, and responsibility for errors and omissions.
	Signature of Debtor 1
Date: 4/21/2021	Signature of Debtor 2 (joint debtor)) (if applicable) Signature of Atterney for Debtor (if applicable)
	/

Michael Wallner 1653 Kendall Drive San Bernardino, CA 92407

Frank R. Sariol, Esq., Frank R. Sariol, PC, dba Sariol Legal 1820 East First Street Suite 200 Santa Ana, CA 92705

AMEX Correspondence/Bankruptcy P.O. Box 981540

El Paso, TX 79998

Capital One Auto Finance Attn: Bankruptcy P.O. Box 30285 Salt Lake City, UT 84130

Cavalry Portfolio Services Attn: Bankruptcy 500 Summit Lake Drive, Suite 400 Valhalla, NY 10595

Citibank/Exxon Mobile Attn: Bankruptcy P.O. Box 790034 St Louis, MO 63179

Citibank/Goodyear Attn: Bankruptcy P.O. Box 790034 St Louis, MO 63179

Citibank/Shell Oil Citicorp Credit Services Centralized BK Dept. P.O. Box 790034 St Louis, MO 63179 Credit First National Association Attn: Bankruptcy P.O. Box 81315 Cleveland, OH 44181

Cynthia Ann Wallner 1653 Kendall Drive San Bernardino, CA 92407

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DSRM Nat Bank/Valero Attn: Bankruptcy P.O. Box 696000 San Antonio, TX 78260

Genesis FS Card Services Attn: Bankruptcy P.O. Box 4477 Beaverton, OR 97076

Jefferson Capital Systems, LLC Attn: Bankruptcy 16 McLeland Road Saint Cloud, MN 56303

Kohls/Capital One Attn: Credit Administrator P.O. Box 3043 Milwaukee, WI 53201

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